

LOG0000067973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

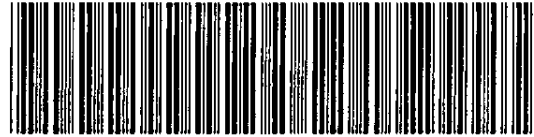
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/26/11--01016--011 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 APR 26 PM 3:01

FILED

J. SAULSBERRY
EXAMINER
APR 28 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: L.A. LITES L.L.C.

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Levester A. Best Jr

(Name of Person)

(Firm/Company)

909 Lake Lindley Dr N

(Address)

Deland FL 32724

(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 APR 26 PM 3:01

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For further information concerning this matter, please call:

Levester A. Best Jr

(Name of Person)

at (386) 717-8131

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$25.00 Filing Fee



30.00 Filing Fee &
Certificate of Status



\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

L.A. Lites L.L.C.

2. The Articles of Organization were filed on 07/15/2009 and assigned document number L09000067973

3. The date the dissolution was approved: 04/01/2011

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

Decided to close this business, relocating to another state.

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2011 APR 26 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

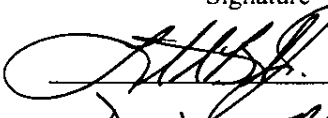
7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.
-OR-
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name


Diane M. Best

Levester A. Best Jr.

Diane M. Best